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Emerging Infectious Diseases

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Emerging infections are new or newly identified pathogens or syndromes that have been recognized in the past two decades. Reemerging infections are known pathogens or syndromes that are increasing in incidence, expanding into new geographic areas, affecting new populations, or threatening to increase in the near future.

EID has an international scope and is intended for professionals in infectious diseases and related sciences. We welcome contributions from infectious disease specialists in academia, industry, clinical practice, and public health, as well as from specialists in economics, demography, sociology, and other disciplines. Inquiries about the suitability of proposed articles may be directed to the editor at 404-639-3967 (telephone), 404-639-3039 (fax), or eideditor@cidod1.em.cdc.gov (e-mail).

EID is published in English and features three types of articles: Perspectives, Synopses, and Dispatches. The purpose and requirements of each type of article are described in detail below. A Spanish version of the journal's first volume is available electronically from the National University of la Plata, Argentina (ftp://ftp.unlp.edu.ar/pub/EID).

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Manuscripts should be prepared according to the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (*JAMA* 1993:269[17]:2282-6).

Begin each of the following sections on a new page and in this order: title page, abstract, text, acknowledgments, references, each table, figure legends, and figures. On the title page, give complete information about each author (full names and highest degree). Give current mailing address for correspondence (include fax number and e-mail address). Follow Uniform Requirements style for references. Consult List of Journals Indexed in Index Medicus for accepted journal abbreviations. Tables and figures should be numbered separately (each beginning with 1) in the order of mention in the text. Double-space everything, including the title page, abstract, references, tables, and figure legends. Italicize scientific names of organisms from species names all the way up, except for vernacular names (viruses that have not really been speciated, such as coxsackievirus and hepatitis B; bacterial organisms, such as pseudomonads, salmonellae, and brucellae).

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Perspectives: Contributions to the Perspectives section should provide insightful analysis and commentary about new and reemerging infectious diseases or related issues. Perspectives may also address factors known to influence the emergence of infectious diseases, including microbial adaption and change; human demographics and behavior; technology and industry; economic development and land use; international travel and commerce; and the breakdown of public health measures. Articles should be approximately 3,500 words and should include references, not to exceed 40. Use of additional subheadings in the main body of the text is recommended. If detailed methods are included, a separate section on experimental procedures should immediately follow the body of the text. Photographs and illustrations are encouraged. Provide a short abstract (150 words) and a brief biographical sketch.

Synopses: Submit concise reviews of infectious diseases or closely related topics. Preference will be given to reviews of emerging and reemerging infectious diseases; however, timely updates of other diseases or topics are also welcome. Synopses should be approximately 3,500 words and should include references, not to exceed 40. Use of subheadings in the main body of the text is recommended. If detailed methods are included, a separate section on experimental procedures should immediately follow the body of the text. Photographs and illustrations are encouraged. Provide a short abstract (150 words) and a brief biographical sketch.

Dispatches: Provide brief updates on trends in infectious diseases or infectious disease research. Include descriptions of new methods for detecting, characterizing, or subtyping emerging or reemerging pathogens. Developments in antimicrobial drugs, vaccines, or infectious disease prevention or elimination programs are appropriate. Case reports are also welcome. Dispatches (1,000 to 1,500 words of text) should not be divided into sections. Provide a short abstract (50 words); references, not to exceed 10; and figures or illustrations, not to exceed two. To expedite publication of information of a more urgent nature, we post the journal's dispatches on the Internet as soon as they are cleared and edited. As soon as the full issue is completed, these dispatches become part of the issue.